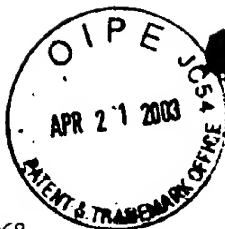


FORM PTO-1083



In re application of:  
Serial No. 09/635,968

Case Docket No. 032026:0471

Filed: August 10, 2000

For: SINGLE MODE, SINGLE LOBE SURFACE EMITTING DISTRIBUTED FEEDBACK SEMICONDUCTOR LASER

COMMISSIONER FOR PATENTS

Patent and Trademark Office

Washington, D.C. 20231

Sir:

Transmitted herewith is an amendment in the above-identified application.

☐ Small entity status of this application under 37 CFR §1.9 and §1.27 has been established by a verified statement previously submitted.

☒ A verified statement to establish small entity under 37 CFR §1.9 and §1.27 is enclosed.

☒ No additional fee is required.

The filing fee has been calculated as shown below:

(Col. 1)		(Col. 2)		(Col. 3)	SMALL ENTITY		OR	OTHER THAN A SMALL ENTITY	
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDIT. FEE		RATE	ADDIT. FEE
TOTAL	16	MINUS	43	= 0	x 9 =	\$ 0		x 18 =	\$
INDEP.	3	MINUS	3	= 0	X 42 =	\$ 0		x 84 =	\$
<input checked="" type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEP. CLAIM					+ 140 =	\$		+ 280 =	\$
					TOTAL ADDIT. FEE	\$ 0	OR	TOTAL	\$

\* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment or the number of claims originally filed.

☐ Please charge my Deposit Account No. \_\_\_\_\_ in the amount of \$ \_\_\_\_\_. A duplicate copy of this sheet is attached.

☐ A check in the amount of \$ \_\_\_\_\_ is attached.

☒ The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 50-2350. A duplicate copy of this sheet is attached.

☒ Any filing fees under 37 CFR §1.16 for the presentation of extra claims.

☐ Any patent application processing fees under 37 CFR §1.17.

Please stamp the enclosed  
postcard with the filing date  
and serial number and  
return the same to me.

Respectfully submitted,

*Harry C. Engstrom*  
Harry C. Engstrom, Reg. No. 26,876  
Foley & Lardner  
P.O. Box 1497  
Madison, WI 53701-1497  
(608) 258-4207

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PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants: Dan Botez,  
James G. Lopez,  
Gunawan Witjaksono

Date: April 15, 2003

Docket No.: 032026:0471

Serial No.: 09/635,968

Group Art Unit: 2828

Filed: August 10, 2000

Examiner: Cornelius H. Jackson

For: **SINGLE MODE, SINGLE LOBE SURFACE EMITTING DISTRIBUTED  
FEEDBACK SEMICONDUCTOR LASER**

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner for Patents, Patent and Trademark Office, Washington, D.C. 20231 on April 15, 2003.

\_\_\_\_\_  
Harry C. Engstrom

(Name of applicant, assignee  
or Registered Representative)

\_\_\_\_\_  
*Harry C. Engstrom*  
(Signature)

\_\_\_\_\_  
April 15, 2003

(Date of Signature)

TECHNOLOGY CENTER 2800

MAY 12 2003

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**REQUEST FOR CORRECTION OF FILING RECEIPT**

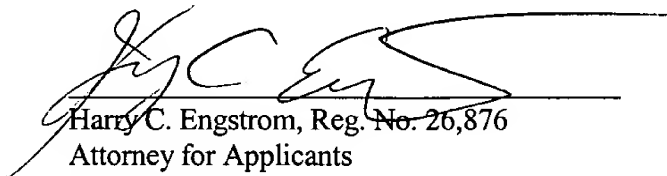
Commissioner for Patents  
Patent and Trademark Office  
Washington, DC 20231

Dear Sir:

Applicants request correction of the Filing Receipt for this application to show that this application claims the benefit of provisional application Serial No. 60/148,857, filed on August 13, 1999, as shown on Page 2 of the Declaration as signed by the inventors and on the first page of the patent application as filed.

The Commissioner is hereby authorized to charge payment of any fees associated with this communication to Deposit Account No. 50-2350. A duplicate copy of this sheet is enclosed.

Respectfully submitted,

A handwritten signature in black ink, appearing to read 'H.C. Engstrom', is written over a horizontal line.

Harry C. Engstrom, Reg. No. 26,876

Attorney for Applicants

Foley & Lardner

150 East Gilman Street

Post Office Box 1497

Madison, Wisconsin 53701-1497

(608) 258-4207

Fax: (608) 258-4258

**FILE COPY**

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Bib Data Sheet

CONFIRMATION NO. 6270

<b>SERIAL NUMBER</b> 09/635,968	<b>FILING DATE</b> 08/10/2000 <b>RULE</b>	<b>CLASS</b> XXX	<b>GROUP ART UNIT</b> 2828	<b>ATTORNEY DOCKET NO.</b> 032026-0471	
<b>APPLICANTS</b> Dan Botez, Madison, WI; James G. Lopez, Derry, NH; Gunawan Witjaksono, Madison, WI;					
<b>** CONTINUING DATA *****</b> This appln claims benefit of 60/148,857 08/13/1999					
<b>** FOREIGN APPLICATIONS *****</b>					
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **</b> ** 09/21/2000					
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged		STATE OR COUNTRY WI	SHEETS DRAWING 10	TOTAL CLAIMS 43	INDEPENDENT CLAIMS 3
<b>ADDRESS</b> 23524					
<b>TITLE</b> Single mode, single lobe surface emitting distributed feedback semiconductor laser					
<b>FILING FEE RECEIVED</b> 627	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		